

PHE Syndromic Surveillance Summary

Produced by the PHE Real-time Syndromic Surveillance team

25 November 2015 Year: 2015 Week: 47

Syndromic surveillance national summary:

Reporting week: 16 November to 22 November 2015

During week 47 there were further increases in a number of respiratory indicators in children aged <5 year across all syndromic surveillance systems. These increases are in line with recent reports of increasing respiratory syncytial virus (RSV) activity.

Remote Health Advice:

Cough and difficulty breathing calls continue to increase in week 47, particularly in children (figures 4, 4a, 5 & 5a). This is in line with recent reports of increasing respiratory syncytial virus (RSV) activity.

Click to access the Remote Health Advice bulletin [intranet] [internet]

GP In Hours:

GP consultation rates upper respiratory tract infection increased during week 47, mainly in children under 5 years (figures 1 &1a). There was also an increase in consultations for lower respiratory tract infection in children under 5 years (figure 5a). Increases are in line with recent reports of increasing respiratory syncytial virus (RSV) activity.

Click to access the GP In Hours bulletin [intranet] [internet]

Emergency Department:

Attendances for acute respiratory infection continue to increase in children (figure 9) and bronchitis/bronchiolitis continues to increase in children under 5 (figure 11). These increases are within seasonally expected levels.

Click to access the EDSSS bulletin [intranet] [internet]

GP Out of Hours:

There have been further increases in bronchitis/bronchiolitis consultations during week 47, with the highest rates in the <1 year age group (figures 4 and 4a). Also consultations for acute respiratory infection increased again, notably in the childhood age groups (figures 2, 2a). These increases are in line with recent reports of increasing respiratory syncytial virus (RSV) activity.

Click to access the GPOOHSS bulletin [intranet] [internet]

RCGP Weekly Returns Service:

Click here to access reports from the RCGP website [external link]



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Syndromic surveillance summary notes

- Key messages are provided from each individual system.
- The different syndromic surveillance systems in operation within PHE access data from different areas of the national health care system.
- Each system is able to monitor a different selection of syndromic indicators based upon a different case mix of patients.
- Access to the full version of each syndromic surveillance bulletin is available through the Syndromic Surveillance website found at: (https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses); reports will be made available on Thursday afternoons.
- Further weekly and annual reports are available from the RCGP Research and Surveillance web pages http://www.rcgp.org.uk/clinical-and-research/research-and-surveillance-centre.aspx

Syndromic surveillance systems

Remote Health Advice

A remote health advice syndromic surveillance system that monitors syndromic calls from remote health advice services e.g. NHS 111 each day across England

GP In-Hours Syndromic Surveillance System

A large UK-based general practitioner surveillance system monitoring daily consultations for a range of clinical syndromic indicators

Emergency Department Syndromic Surveillance System (EDSSS)

A sentinel ED network across England monitoring daily attendances and presenting symptoms/diagnoses

GP Out-of-Hours Syndromic Surveillance System (GPOOHS)

A syndromic surveillance system monitoring daily GP out-of hours activity and unscheduled care across England using a range of clinical syndromic indicators

RCGP Weekly Returns Service (RCGP WRS)

A sentinel GP surveillance network covering England and Wales monitoring weekly consultations for a range of clinical indicators. This surveillance system is coordinated by the RCGP Research and Surveillance Centre

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- Participating EDSSS emergency departments
- College of Emergency Medicine
- Advanced Health & Care and the participating OOH service providers
- QSurveillance[®]; University of Nottingham; EMIS/EMIS practices; ClinRisk®
- TPP, ResearchOne and participating SystmOne GP practices

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